## N14000000000000954

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
·				

Office Use Only



100263715251

09/11/14--01027--006 \*\*35.00



Amendrand

## **COVER LETTER**

TO: Amendment Sections
Division of Corporations

NAME OF CORPOR	ATION: Urgent Care	Center Accreditati	on of America, Inc.				
DOCUMENT NUMBER: N14000002954							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all corres	pondence concerning this mat	ter to the following:					
	Jaafar Choufani,	Esquire					
-		Name of Contact Person					
	Allen, Dyer, Dopp	elt. Milbrath & G	Bilchrist, P.A.				
-		Firm/ Company					
	255 S. Orange Av	venue, Suite 140	)1				
-		Address					
	Orlando, Florida	32801					
-		City/ State and Zip Code	}				
icho	oufani@addmg.co	nm					
<u> </u>		ed for future annual report	notification)				
	•	•	•				
For further information	concerning this matter, pleas	e call:					
Jaafar Choufani at (407 841-2330							
Name of Contact Person Area Code & Daytime Telephone Nur							
Enclosed is a check for	Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address		Street Address					
	ndment Section	Amendment Section					
	sion of Corporations Box 6327	Division of Corporations Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle							
Tallahassee, FL 32301							

## Articles of Amendment to Articles of Incorporation of

14 SEP // Du Standing
14 SEP 11 PM 12: 44
1 PH 12: 44

<b>Urgent Care Center Acc</b>	reditation of America, Inc.		
(Name of Corporation as current)	y filed with the Florida Dept. of State)		
N14000002954			
(Doct	ument Number of Corporation (if known)	* * ***	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporate	1006, Florida Statutes, this <i>Florida Not Fo</i> ion:	r Profit Corporation adopts the fo	ollowing
A. If amending name, enter the new na	me of the corporation:		
National Urgent Care Cer	nter Accreditation, Inc.		The new
name must be distinguishable and contain "Company" or "Co." may not be used in	the word "corporation" or "incorporated the name.		
B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u>			
C. Enton now mailing address if anni-			
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C			
	d/or registered office address in Florida,	enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent:	Jaafar Choufani, Esq./Allen, Dyer, D	oppeit, et al.	
	255 S. Orange Avenue, Si	uite 1401	
New Registered Office Address:	(Florida street address)		
<u> </u>	Orlando	, Florida 32801	
	(City)	, riorida (Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nanging Registered Agent: ered agent. I am familiar with and accept Signature of New Registered Agent, if ch	-	

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:  X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>		
Type of Action (Check One)	Title		Name		Address
1) Change		_		-	
Add					
Remove					
2) Change	<del></del>	_		-	
Add				-	
Remove					
3) Change		_		_	
Add					
Remove					
4) Change		_		_	
Add					
Remove				•	
5) Change					
Add		_		•	
Remove				•	
6) Change	_	_		-	
Add				,	
Remove					

amending or adding additional Arttach additional sheets, if necessary).	(Be specific)	
		· · · · · · · · · · · · · · · · · · ·
		1. U.S.
	<del></del> -	
	, , , , , , , , , , , , , , , , , , ,	
		. ,,
<del></del> .		

	e date of each amendment(s) adoption: August 1, 2014 e this document was signed.	, if other than the
Eff	ective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
Ad	option of Amendment(s) ( <u>CHECK ONE</u> )	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated August 1, 2014	
	Signature Muttur	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Martha Ritucci	
	(Typed or printed name of person signing)	
	President	
	(Title of nerson signing)	